NIXON PEABODY LLP
100 Summer Street
Boston, Massachusetts 02110

Attorney's Docket No. 701039-053543

Page 1 of 4

## **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed at 201) below or an original, first and joint inventor (if plural names are listed at 201-208 below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## PREVENTION OF SURGICAL ADHESIONS USING SELECTIVE COX-2 INHIBITORS

which i	is descr	ibed and claimed in:
		the specification attached hereto.
2004.	X	the specification in U.S. Application Serial Number 10/767,870 filed on January 29
		the specification in PCT International Application Number filed on .

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign/PCT Applications and Any Priority Claims Under 35 U.S.C. §119:			
Application No.	Filing Date	Country	Priority Claimed under 35 U.S.C. §119?
			□YES □NO

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge

the duty to disclose material information as defined in 37 CFR §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

Application Serial No. U.S. Filing Date Patented Pending A	bandoned
PCT Applications Designating the U.S.	
Application No. Filing Date U.S. Serial No. Assigned	

## CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S) (35 U.S.C. §119(e))

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

43,345 January 29, 2003
12,379 October 17, 2003

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) with full powers of association, substitution and revocation to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

(Reg. No. 34,235) Michael L. Goldman (Reg. No. 30,727) Ronald I. Eisenstein (Reg. No. 30,628) David S. Resnick (Reg. No. 44,957) Nicole L.M. Valtz (Reg. No. 47,150) Leena Karttunen (37 CFR Sec. 10.9(b)) Georgia Evans Lisa A. Dolak (Reg. No. 35,491) Joseph Noto (Reg. No. 32,163)) Gunnar G. Leinberg (Reg. No. 35,584) Edwin V. Merkel (Reg. No. 40,087)

SEND CORRESPONDENCE TO: David S. Resnick	DIRECT TELEPHONE CALLS TO:
NIXON PEABODY LLP	David S. Resnick
100 Summer Street	(617) 345-6057
Boston, Massachusetts 02110	

	FULL NAME OF	LAST NAME	FIRST NAME	MIDDLE NAME
	INVENTOR	PUDER	MARK	
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Medfield	MA	us
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY AND ZIP CODE
	ADDRESS	22 Boyden Road	Medfield	MA 02052

	OF	LAST NAME	FIRST NAME	MIDDLE NAME
	INVENTOR	GREENE	ARIN	K.
2 0 2	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Wellesley	MA	us
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY AND ZIP CODE
	ADDRESS	6 Woodlawn Oval	Wellesley	MA 02481

		LAST NAME	FIRST NAME	MIDDLE NAME
	OF INVENTOR	FOLKMAN	JUDAH	
2 0 3	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Brookline	MA	us
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY AND ZIP CODE
		18 Chatham Circle	Brookline	MA 02115

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Signature of Inventor 201 - Mark Puder	Date:
Mil Ruder	5/7/04
Signature of Inventor 202 - Arin K. Greene	Date:
( Hen, m	5/24/04
Signature of Inventor 203 - Judah Folkman	Date:
Judah Folkman, mo.	May 24, 2004
	Y